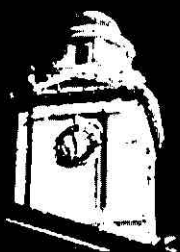


PLEASE  
AFFIX  
FIRST CLASS  
POSTAGE

OFFICE OF ADMISSIONS  
BEREA COLLEGE BOX 2220  
BEREA KY 40404

*Fold on lines with mailing address out, tape and mail.*



 **BEREA COLLEGE**

## Required Recommendation Form

To Whom It May Concern,

The student named on the reverse side of this form has applied for admission to Berea College and has selected you to provide a recommendation. The Admissions Decision Team requires two recommendations from individuals not related to the applicant.

We ask that you respond to each category and that you provide additional information which you believe would be useful in the process of decision-making. If you require more space, please attach an additional sheet.

Berea College is pleased to provide a high quality educational program and a full tuition scholarship to every admitted student. The number of new students offered admission and scholarship is limited each year. Therefore, your candid assessment of this particular student will help assure that we provide these opportunities to the most deserving applicants. Thank you in advance for your effort, candor and prompt attention to this matter.

Sincerely,

The Admissions Decision Team

TO BE COMPLETED BY APPLICANT

(Please type or print in ink)

Social Security Number

Name

Address

City State Zip

Phone

I hereby waive my right to review this form after completion.

Applicant's Signature

TO BE COMPLETED BY RECOMMENDER

(Please type or print in ink)

Name of Recommender

Address

City State Zip

Daytime Phone

Title Place of Employment

Compared to all other college-bound students with whom you have had experience, please circle your perception of the applicant :

	Far Below Average											Far Above Average	Not Observed
1. Academic work ethic	1	2	3	4	5	6	7	8	9	10	11		<input type="checkbox"/>
2. Initiative	1	2	3	4	5	6	7	8	9	10	11		<input type="checkbox"/>
3. Reliability	1	2	3	4	5	6	7	8	9	10	11		<input type="checkbox"/>
4. Adaptability	1	2	3	4	5	6	7	8	9	10	11		<input type="checkbox"/>
5. Leadership	1	2	3	4	5	6	7	8	9	10	11		<input type="checkbox"/>
6. Concern for others	1	2	3	4	5	6	7	8	9	10	11		<input type="checkbox"/>
7. Emotional stability	1	2	3	4	5	6	7	8	9	10	11		<input type="checkbox"/>
8. Respectful of others' beliefs	1	2	3	4	5	6	7	8	9	10	11		<input type="checkbox"/>
9. Sense of fairness and justice	1	2	3	4	5	6	7	8	9	10	11		<input type="checkbox"/>
10. Service to the community	1	2	3	4	5	6	7	8	9	10	11		<input type="checkbox"/>
11. Successfully completes activities (as in extracurricular involvement)	1	2	3	4	5	6	7	8	9	10	11		<input type="checkbox"/>

Please provide any additional information you believe is relevant (attach a separate sheet if necessary):

on line

Fold on line

Compared to all other college-bound students, please circle the number which best describes the degree to which you recommend this student:

I do not recommend this student	1	2	3	4	5	6	7	8	9	10	11	I highly recommend this student
---------------------------------	---	---	---	---	---	---	---	---	---	----	----	---------------------------------

Signature

Date

Please do not staple. The Post Office will not accept stapled forms. Seal with tape only.